

ONTARIO DEVELOPMENT CORPORATION

CAZON  
IT  
-2023



ABORIGINAL  
BUSINESS  
VENTURES  
LOAN APPLICATION



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## ABORIGINAL BUSINESS VENTURES - ADDENDUM

Please note that as of May 1, 1994, the participating financial institutions accepting applications to the Aboriginal Business Ventures Program will be expanded to include the following:

Bank of Montreal  
Royal Bank of Canada  
The Toronto-Dominion Bank  
The Bank of Nova Scotia  
Canadian Imperial Bank of Commerce

In addition, the participating Aboriginal Development Corporations recommending applications to the Aboriginal Business Ventures Program will be expanded to include:

S.O.A.R. Development Corporation (Akwasasne)  
Waubetek Development Corporation (Manitoulin)  
Moose Factory First Nation Economic Development Program (Moose Factory)  
The Enterprise Circle (Blind River)  
Six Nations Development Corporation (Ohsweken)  
Tecumseh Development Corporation (Muncey)  
Matagami First Nation (Gogama)  
Matachewan First Nation (Matachewan)  
Wahgoshig First Nation (Matheson)  
Beaverhouse First Nation (Kirkland Lake)

Further information and application forms can also be obtained from any of the participating bank branches listed below:

**BANK OF MONTREAL**

159 Pitt Street  
**CORNWALL** ONT K6J 3P5  
Tel. (613) 938 5617

Manitowaning Sub  
29 Water Street East  
**LITTLE CURRENT** ONT POP 1KO  
Tel. (705) 368-2260

556 Queen Street East  
**SAULT STE. MARIE** ONT P6A 5L8  
Tel. (705) 949-3221

Peace Tree Trade Centre  
Unit 8  
**CORNWALL ISLAND** ONT K6H 5R7  
Tel. (613) 938-5633

17 Mary Walk  
**ELLIOT LAKE** ONT P5A 1Z9  
Tel. (705) 848-2211

74 Durham Street  
**SUDBURY** ONT P3E 3M6  
Tel. (705) 670-2235

27 Pine Street  
**TIMMINS** ONT P4N 2J9  
Tel. (705) 264-5381

London Street, Box 130  
**THAMESVILLE** ONT N0P 2K0  
Tel. (519) 692-3931

770 James Street  
**WALLACEBURG** ONT N3A 2P5  
Tel. (519) 627-1685

408 Talbot St., Box 571  
**ST. THOMAS** ONT N5P 3V6  
Tel. (519) 631-6090

3 Talbot Street E.  
**AYLMER** ONT N5H 2R8  
Tel. (519) 773-9295

785 Wonderland Road  
**LONDON** ONT N6K 1M6  
Tel. (519) 667-6195

215 Christina St. North  
**SARNIA** ONT N7T 7J2  
Tel. (519) 344-2442

600 Murphy Road  
**CLEARWATER** ONT N7S 2X3  
Tel. (519) 344-2481

520 Helena Street  
**POINT EDWARD** ONT N7V 1R9  
Tel. (519) 344-8835

**ROYAL BANK OF CANADA**

1 Woodward Avenue  
**BLIND RIVER** ONT P0R 1B0  
Tel. (705) 356-2212

115 Tudhope Street  
**ESPAÑOLA** ONT POP 1C0  
Tel. (705) 869-3241

The 101 Mall  
38 Pine Street North  
**TIMMINS** ONT P4N 6K6  
Tel. (705) 267-7171

300 Pitt Street  
**CORNWALL** ONT K6J 3P9  
Tel. (613) 930-2530

Ohsweken Branch  
Six Nations of the Grand River  
**OHSWEKEN** ONT N0A 1M0  
Tel. (519) 445-4141

38 Front Street West  
**STRATHROY** ONT N7G 3J2  
Tel. (519) 245-1420

577 Bedford Street  
**WIARTON** ONT N0H 2T0  
Tel. (519) 534-2134

ROYAL BANK OF CANADA Cont'd

102 Queen Street East, 2nd Floor  
**SAULT STE. MARIE** ONT P6A 2A4  
Tel. (705) 759-7022

2 Saskatchewan Road  
**ELLIOT LAKE** ONT P5A 2J7  
Tel. (705) 461-9225

72 Durham Street  
**SUDBURY** ONT P3E 4S9  
Tel. (705) 688-4710

925 Stockdale Road  
2nd Floor  
**NORTH BAY** ONT P1B 9N5  
Tel. (705) 494-7123

383 Richmond Street  
Suite 1110  
**LONDON** ONT N6A 3C4  
Tel. (519) 661-1270

230 North Christina Street  
**SARNIA** ONT N7T 7K1  
Tel. (519) 332-6800

401 George St. North  
**PETERBOROUGH** ONT K9J 6Y8  
Tel. (613) 876-3534

CANADIAN IMPERIAL BANK OF COMMERCE

530 Queen Street  
**SAULT STE. MARIE** ONT P6A 5L7  
Tel. (705) 254-6633

37 Elizabeth Square  
**ELLIOT LAKE** ONT P5A 2J5  
Tel. (705) 848-2266

236 Third Avenue  
**TIMMINS** ONT P4N 7E2  
Tel. (705) 264-4234

10 Government Road West  
**KIRKLAND LAKE** ONT P2N 3K4  
Tel. (705) 567-5201

Pitt & Second Streets  
**CORNWALL** ONT K6H 5V3  
Tel. (613) 932-3200

203 Main Street  
**THESSALON** ONT P0R 1L0  
Tel. (705) 842-2119

116 Cedar Street  
**SUDBURY** ONT P3E 4N3  
Tel. (705) 673-4195

Wabun Road & 1st Ave  
**MOOSONEE** ONT POL 1Y0  
Tel. (705) 336-2997

2 King Street West  
**FOREST** ONT NON 1J0  
Tel. (519) 786-2356

14 Main Street  
**THEDFORD** ONT NOM 2N0  
Tel. (519) 296-4969

190 North Front St.  
**SARNIA** ONT N7T 5S3  
Tel. (519) 332-4466

252 Main Street  
**GLENCOE** ONT NOL 1M0  
Tel. (519) 287-2018

440 Talbot Street  
**ST. THOMAS** ONT N5P 3T7  
Tel. (519) 631-1280

103 Main Street  
**DRESDEN** ONT NOP 1M0  
Tel. (519) 683-4434

43 Main St. West  
**RIDGETOWN** ONT NOP 2C0  
Tel. (519) 674-5452

Dufferin Rd. & Lisgard Rd.  
**WALLACEBURG** ONT N8A 4L5  
Tel. (519) 627-0741

TORONTO-DOMINION BANK

365 Richmond St  
**LONDON** ONT N6A 4K2  
Tel. (519) 667-1300

827 Dufferin Avenue  
**WALLACEBURG** ONT NOA 4L5  
Tel. (519) 627-2223

402 James Street  
**WALLACEBURG** ONT N8A 4L5  
Tel. (519) 627-1681

15 King Street East  
**FOREST** ONT NON 1J0  
Tel. (519) 786-2185

115 Mead Blvd  
**ESPAÑOLA** ONT POP 1C0  
Tel. (705) 869-3051

Main St. & Wyld St  
**NORTH BAY** ONT P1B 8H5  
Tel. (705) 472-4370

421 Bay Street  
**SAULT STE. MARIE** ONT P6A 5N7  
Tel. (705) 254-6424

Timiskaming Square  
Hwy 11B & 65 East  
**NEW LISKEARD** ONT POJ 1PO  
Tel. (705) 647-4315

6 Pine Street & Algonquin Blvd  
**TIMMINS** ONT P4N 7C5  
Tel. (705) 264-1305

41 Second Street  
**CORNWALL** ONT K6J 1G3  
Tel. (613) 933-3801

54 Durham Street  
**SUDBURY** ONT P3E 4P8  
Tel. (705) 675-1324

BANK OF NOVA SCOTIA

1 Pine Street South  
**TIMMINS** ONT P4N 7C9  
Tel. (705) 268-8030

293 Bay Street  
Station Mall Postal Outlet  
**SAULT STE. MARIE** ONT P6A 6W6  
Tel. (705) 759-1688

204 Main Street  
**NORTH BAY** ONT P1B 8H9  
Tel. (705) 494-4688

1 Front Street West  
**SPANISH** ONT POP 2AO  
Tel. (705) 844-2161

57 Durham Street South  
**SUDBURY** ONT P3E 4R3  
Tel. (705) 675-3361

County Fair Mall  
60-16 McNaughton Ave.  
**WALLACEBURG** ONT N8A 1R9  
Tel. (519) 627-1437

Brookdale Mall  
966 Brookdale Avenue N.,  
**CORNWALL** ONT K6J 4P4  
Tel. (613) 930-2585

297-299 Front Street  
**BELLEVILLE** ONT K8N 4Z9  
Tel. (613) 967-6700

56 Mississauga St. E  
**ORILLIA** ONT L5V 6K7  
Tel. (705) -325-1341

27 James Street  
**PARRY SOUND** ONT P2A 2X3  
Tel. (705) 746-5821

## POLICIES AND GUIDELINES

Aboriginal Business Ventures Program is a new initiative of the Government of Ontario to encourage and promote new aboriginal small business success initially in: Akwesasne, Moose Factory, Manitoulin Island and North Shore. It is designed to provide personal loans up to a maximum of \$15,000 for each eligible business via participating Bank of Montreal at a floating interest rate of prime plus one percent, or a fixed rate to be negotiated with the Bank of Montreal. These loans are guaranteed by the Province of Ontario. The Aboriginal Business Ventures Program is administered by the Ontario Development Corporation, an agency of the Ministry of Economic Development and Trade.

### ELIGIBILITY CRITERIA:

- 1** You must be a resident of one of the three First Nations Communities of Akwesasne Moose Factory, Manitoulin Island and North Shore, age 18 or older with a valid Social Insurance number.
  - 2** You must be starting up a new full-time business. A full-time business is either;
    - a** one that is operating during normal business hours, or
    - b** one that is operating a minimum of 2,000 hours per year.
    - c** The business must also fall within the generally accepted definitions of an independent business. For example, product distribution, multi-level marketing and commissioned salespersons are not eligible.  
**or**  
an existing business that has been successful for a period of not less than one year.
  - 3** You must apply for a registration or incorporation of the new business with the Ministry of Consumer and Commercial Relations.
  - 4** To be eligible, you and/or your family members must not own a similar business of which your new business might be considered a natural extension.
  - 5** For a partnership, each partner must be a co-applicant for the loan.
  - 6** For a corporation, every shareholder must be a co-applicant for the loan.
  - 7** You and/or your business are eligible for only one Aboriginal Business Ventures loan in your lifetime.
  - 8** At the time of the loan approval, you must make a cash equity contribution equal to 50% of the amount of the loan. However, applicants to the new program will only be required to contribute cash equity of their own equal to at least 10% of the amount of the loan, while up to 40% of the loan amount can be cash equity raised from other sources (e.g. a Band Council or other unencumbered loans or grants).
- For example, on a \$15,000 loan the applicant must provide at least \$1,500 in cash equity of his or her own, while raising an additional \$6,000 from other unencumbered sources. Your existing equipment, inventory, deposits for equipment and other expenditures are not considered as equity contributions under the program.
- 9** If the cash equity contribution is borrowed, the funds cannot be repaid during the term of the loan, nor can the assets of the business be pledged for that loan.
  - 10** Other Government loans and grants may be considered as cash equity contributions.
  - 11** The loan must be used to cover essential start-up costs of a new business. The loan proceeds must not be used:
    - a** to finance existing debts or to finance transactions between related businesses or individuals.
    - b** to purchase an existing business or to assume the clients or name of business which is already operating or has ceased operation within six months.
    - c** to purchase the assets of a business and to operate a similar business on the same premises as that failed or ceased business within six months of purchase.
  - 12** A business which has received funding under Youth Venture and New Ventures is not eligible for an Aboriginal Business Ventures loan.
  - 13** Professionals or anyone who has acquired a licence to practice a profession (such as doctors, lawyers, dentists, accountants, etc.) are eligible for a loan to establish a practice relating to their profession.
  - 14** Farm operators are eligible for this loan to operate a farm.

# ABORIGINAL BUSINESS VENTURES

## HOW TO APPLY:

- 1** You must complete the Personal Information, Business Plan, Cash Forecast and Projected Income Statement in the 'working copy' section of the application booklet. Then transfer the information from your working copy to your application and complete the Summary Form on page K.
  - 2** Complete the Certificate of Equity Schedule "A" and submit with the application.
- Incomplete applications will not be processed by the bank.**
- 3** In the case of a partnership or a corporation, each partner or shareholder must complete a separate Personal Information section as provided in both your working copy and in the final application.
  - 4** Detach your application at the perforation and keep the working copy for your records.

- 5** Contact one of the approved Development Corporations serving your community for assistance and recommendation for approval of the loan.
  - 1) S.O.A.R. DEVELOPMENT CORPORATION**
  - 2) WAUBETEK DEVELOPMENT CORPORATION**
  - 3) MOOSE FACTORY FIRST NATION ECONOMIC DEVELOPMENT PROGRAM**
- 6** Contact the Bank of Montreal for an appointment to review your application. A lending officer will interview you to assess your business proposal and discuss terms and conditions of the loan. You should receive an answer from the lending officer within two weeks on the status of the loan.

## REQUIREMENTS:

If your loan is approved, you will be required to:

- 1 Obtain any licences, permits or insurance which apply to your business.
- 2 Set up your business within four weeks from loan approval, if you have not already done so.
- 3 Obtain a full disbursement within *six* months of receiving your loan approval.
- 4 Sign a Loan Agreement and Promissory Note. Each co-applicant will be responsible for full repayment of the loan. In the case of a partnership or a corporation, all partners or shareholders must sign the Loan Agreement and Promissory Note.
- 5 Open a business account with the lending branch and deposit the entire amount of your equity contribution and the proceeds of the Aboriginal Business Ventures loan into this account. If you already have an existing account with another financial institution you may still continue to bank with that Institution.  
  
The schedule of advances on the Aboriginal Business Ventures loan funds within the first *six* months will be negotiated between you and the lender.
- 6 Within *six* weeks of obtaining the loan, you must submit the Certificate of Expenditures (Schedule "B") and Schedule of Expenditures (Schedule "C") with original invoices supporting your start up costs to the New Ventures Office.
- 7 Make monthly payments of interest only during the first 12 months of the loan term from the date of the first disbursement. Thereafter, payments must include principal plus interest whereby the principal is reduced by 25% per year over the next four years.
- 8 Repay the full amount of the outstanding loan if the business is sold or transferred during the term of the Guarantee.
- 9 Complete and return, within 30 days, the Business Review Form mailed to you by the New Ventures Program office on December 30.

If you have any questions, call the Ontario Development Corporation's New Ventures Office at:

Toll Free - **1-800-387-5616**

# ABORIGINAL BUSINESS VENTURES

## ABORIGINAL BUSINESS VENTURES

YOUR  
APPLICATION

### PERSONAL INFORMATION

PLEASE PRINT

Last name, First name, Middle initial	Date of Birth	Social Insurance Number	
Home address	<input type="checkbox"/> Own <input type="checkbox"/> Rent	Sex (M/F)	How long have you lived at this address
City	Postal Code	Home Telephone Number (      )	Business Telephone Number (      )
Previous address if moved within 3 years		How long did you live at previous address	
Are you an Ontario Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No State First Nation Group <input type="checkbox"/>			

What will your role be in the business and how has your education and business experience prepared you for this role?

Role: \_\_\_\_\_

Education: \_\_\_\_\_

Business Experience: \_\_\_\_\_

Please provide information of your most recent employment:

Company Name: \_\_\_\_\_ Telephone: (      ) \_\_\_\_\_

Address: \_\_\_\_\_ Gross Annual Income: \_\_\_\_\_

Title: \_\_\_\_\_ Date Employed From: \_\_\_\_\_ To: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Previous employer: \_\_\_\_\_ Date Employed From: \_\_\_\_\_ To: \_\_\_\_\_

Have you ever been self employed?  Yes  No

(If yes please give details) \_\_\_\_\_

If the new business fails how would you repay the loan?

Do you or any members of your family own an interest in a similar business or a business of which the new business might be considered to be a natural extension?

Yes  No

(If yes, please explain) \_\_\_\_\_

Does your spouse or any other family member presently have or has ever had a New Ventures loan or Aboriginal Business Ventures loan?

Yes  No

(If yes, give details) \_\_\_\_\_

#### REFERENCES

Name of your Bank(s)/Location(s) \_\_\_\_\_

Landlord/Mortgage Holder \_\_\_\_\_

# ABORIGINAL BUSINESS VENTURES

**Real Estate Owned**

Location	Registered Owner	Year Purchased	Purchase Price	Current Value
			\$	\$
				<b>Total Current Value</b>
				\$

**Details of Liabilities**

Individual/Institution Holding Debt	Amount of Original Loan	Current Loan Outstanding	Monthly Payments	Loan Due Date	Purpose of Loan
	\$	\$	\$		
<b>Total Outstanding</b>					\$

**Personal Financial Statement as at (Date) \_\_\_\_\_**
**ASSETS**

Cash	\$ _____	Mortgage(s) owing	\$ _____
Liquid Assets (stocks, bonds etc. please itemize)	_____	Credit Card(s) owing	\$ _____
	\$ _____		
Automobile (current value)	\$ _____	Loans (total outstanding)	\$ _____
Real Estate (total present value)	\$ _____		
<b>TOTAL ASSETS</b>	<b>\$ _____</b>	<b>TOTAL LIABILITIES</b>	<b>\$ _____</b>

**Net Worth (total assets minus total liabilities) \$ \_\_\_\_\_**

Do you have any guarantees or other liabilities outstanding?

Yes  No

Details, including amounts: \_\_\_\_\_

Are there any judgments or legal proceedings against you?

Yes  No

Details, including amounts: \_\_\_\_\_

Please list all sources and amounts of monthly income. \_\_\_\_\_

**CERTIFICATE**

I certify that all of the information given by me in this application is true and complete. I authorize the officers of this financial institution or the Ministry of Economic Development and Trade or their agents to make all necessary credit investigations or credit reporting and provide the Ontario Development Corporation with all relevant information. I approve the disclosure of any information concerning the undersigned to any credit reporting agency. I agree that the Ontario Development Corporation may make a public announcement relating to this Aboriginal Business Ventures loan, if approved, and also has the right to audit the records of my business during the guarantee period. I understand that any false information given in this application and any accompanying materials may result in rejection of this application or immediate demand for repayment of the loan in full together with any interest accrued thereon. I authorize the Ministry of Economic Development and Trade and the Ontario Development Corporation to provide the lender with all relevant information.

**NOTICE**

Any personal information contained in this, or any subsequent forms attached or forwarded at a later date, is received under the authority of Section 12 of the Development Corporations Act, R.S.O. 1980, C.117 as amended and Sections 3, 6 & 11 of the Ministry of Industry and Trade Act, S.O. 1982, C.31 and will be used to provide a data base of borrowers registered in the Aboriginal Business Ventures loan program, to ensure that borrowers receive only one loan and that statistical information on the program is recorded.

**It is an offence to obtain or to assist another to obtain the Aboriginal Business Ventures Program loan by fraud or false pretence.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**NOTE:** Complete a Personal Information Form for each Applicant, Co-Applicant and Shareholder who is a signing officer. If more forms are required, please make photocopies.

# ABORIGINAL BUSINESS VENTURES

## CO-APPLICANT PERSONAL INFORMATION

PLEASE PRINT

Last name, First name, Middle initial	Date of Birth	Social Insurance Number	
Home address	<input type="checkbox"/> Own <input type="checkbox"/> Rent	Sex (M/F)	How long have you lived at this address
City	Postal Code	Home Telephone Number (      )	Business Telephone Number (      )
Previous address if moved within 3 years			How long did you live at previous address
Are you an Ontario Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No State First Nation Group <input type="checkbox"/>			

What will your role be in the business and how has your education and business experience prepared you for this role?

Role: \_\_\_\_\_

Education: \_\_\_\_\_

Business Experience: \_\_\_\_\_

Please provide information of your most recent employment:

Company Name: \_\_\_\_\_ Telephone: (      ) \_\_\_\_\_

Address: \_\_\_\_\_ Gross Annual Income: \_\_\_\_\_

Title: \_\_\_\_\_ Date Employed From: \_\_\_\_\_ To: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Previous employer: \_\_\_\_\_ Date Employed From: \_\_\_\_\_ To: \_\_\_\_\_

Have you ever been self employed?  Yes  No

(If yes please give details) \_\_\_\_\_

If the new business fails how would you repay the loan?

Do you or any members of your family own an interest in a similar business or a business of which the new venture might be considered to be a natural extension?

Yes  No

(If yes, please explain) \_\_\_\_\_

Does your spouse or any other family member presently have or has ever had a New Ventures loan or Aboriginal Business Ventures loan?

Yes  No

(If yes, give details) \_\_\_\_\_

### REFERENCES

Name of your Bank(s)/Location(s) \_\_\_\_\_

Landlord/Mortgage Holder \_\_\_\_\_

# ABORIGINAL BUSINESS VENTURES

## Real Estate Owned

Location	Registered Owner	Year Purchased	Purchase Price	Current Value
			\$	\$
Total Current Value				\$

## Details of Liabilities

Individual/Institution Holding Debt	Amount of Original Loan	Current Loan Outstanding	Monthly Payments	Loan Due Date	Purpose of Loan
	\$	\$	\$		
Total Outstanding		\$			

## Personal Financial Statement as at (Date) \_\_\_\_\_

### ASSETS

Cash	\$ _____	Mortgage(s) owing	\$ _____
Liquid Assets (stocks, bonds etc. please itemize)	\$ _____	Credit Card(s) owing	\$ _____
	\$ _____		
Automobile (current value)	\$ _____	Loans (total outstanding)	\$ _____
Real Estate (total present value)	\$ _____		
<b>TOTAL ASSETS</b>	<b>\$ _____</b>	<b>TOTAL LIABILITIES</b>	<b>\$ _____</b>

### Net Worth (total assets minus total liabilities) \$ \_\_\_\_\_

Do you have any guarantees or other liabilities outstanding? Yes  No

Details, including amounts: \_\_\_\_\_

Are there any judgments or legal proceedings against you? Yes  No

Details, including amounts: \_\_\_\_\_

Please list all sources and amounts of monthly income. \_\_\_\_\_

### CERTIFICATE

I certify that all of the information given by me in this application is true and complete. I authorize the officers of this financial institution or the Ministry of Economic Development and Trade or their agents to make all necessary credit investigations or credit reporting and provide the Ontario Development Corporation with all relevant information. I approve the disclosure of any information concerning the undersigned to any credit requesting agency. I agree that the Ontario Development Corporation may make a public announcement relating to this Aboriginal Business Ventures loan, if approved, and also has the right to audit the records of my business during the guarantee period. I understand that any false information given in this application and any accompanying materials may result in rejection of this application or immediate demand for repayment of the loan in full together with any interest accrued thereon. I authorize the Ministry of Economic Development and Trade and the Ontario Development Corporation to provide the lender with all relevant information.

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Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

NOTE: Complete a Personal Information Form for each Applicant, Co-Applicant and Shareholder who is a signing officer. If more forms are required, please make photocopies.

# ABORIGINAL BUSINESS VENTURES

## BUSINESS PLAN

As part of your Aboriginal Business Ventures Program application you are required to submit a business plan. Remember, a well prepared business plan is absolutely necessary because it serves to justify the business proposal, as well as to convince the lending officer that you have thoroughly researched and planned for your new business. It will also improve your chance for success.

IF SPACE PROVIDED  
IS INSUFFICIENT  
PLEASE ATTACH  
A SEPARATE SHEET

### 1. BUSINESS PROFILE

Company Name	Company Telephone Number (      )				
Company Address					
City	Postal Code				
Date Business Registered/Incorporated	Day   Month   Year				
Form of Business Ownership					
<input type="checkbox"/> Sole Proprietorship: Name _____					
<input type="checkbox"/> Partnership: Names of Partners _____					
<input type="checkbox"/> Corporation: Names of Signing Officers who are Shareholders _____					
Classification of Business:					
<input type="checkbox"/> Retail	<input type="checkbox"/> Food	<input type="checkbox"/> Farming	<input type="checkbox"/> Tourism	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Service
<input type="checkbox"/> Construction	<input type="checkbox"/> Wholesale/Distribution	<input type="checkbox"/> Professional	<input type="checkbox"/> Other (specify) _____		
Will your involvement in this business be		<input type="checkbox"/> Full-time	or	<input type="checkbox"/> Part-time	

If part-time, please explain how your business will be able to operate full-time.

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### 2. OBJECTIVES

Describe in detail what your business will do, what product or service will be provided?

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### 3. COMPETITION AND SUPPLIERS

Who are your competitors, what are their locations, and how long have they been in business?

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Explain why your customers will prefer your product or service over your competitors.

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# ABORIGINAL BUSINESS VENTURES

Who are your major suppliers (if applicable), where are they located and what are their credit terms?  
Can you change your suppliers easily if required?

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## 4. CUSTOMERS

What market research have you conducted to determine how many potential customers are in the areas you plan to operate? The research may include door-to-door, telephone or mail surveys, discussions with suppliers or competitors, and statistical data. Please provide both the details of the research (eg. copy of questionnaire or survey, or how many you have called) and the results.

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What are the characteristics of your typical customers (ie. age, location, education, etc.)?

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How will you inform customers about your service or product?

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What form of advertising would be most effective for your business (business cards, radio, newspaper, pamphlets, etc.)?

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How much do you intend to spend on advertising and have you budgeted for this expense?

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## 5. PRICE AND COSTS

What does it cost you to offer your product(s) or service(s) to your customers? Cost may be expressed per unit, hour or job. Provide a breakdown of how you determined your cost including materials, labour, inventory and overhead costs.

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What price will you charge customers for your product(s) or service(s)? State prices in terms of quantity or fee per hour. If prices vary, give an example. Provide a breakdown of how you arrived at your prices. (Include your costs and markup or profit margins.)

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# ABORIGINAL BUSINESS VENTURES

## BUSINESS PLAN

What level of sales would you have to reach to just cover your costs (break-even point)?

Have you made provisions for contingency costs, such as warranty/servicing, insurance and start-up, in your pricing?

### 6. OPERATING REQUIREMENTS

What government regulations, licences, permits and insurance pertain to your business and have they been obtained?

Identify your business requirements such as size and type of premises, equipment, furniture and fixtures. Will they be leased or purchased and will deposits be required?

What skills are required to operate your business and who will provide them?

Skills needed.

How many employees will you have to hire?

Number of Employees	At Start-up	Part-time	Full-time	By Year 3	Part-time	Full-time
_____	_____	_____	_____	_____	_____	_____

Will franchises, patents, trademarks and licensing agreements be important factors in your business? If yes, please provide a copy of the agreement with the franchisor, licensor and proof of approved patent or trademark.

# **ABORIGINAL BUSINESS VENTURES**

## **INSTRUCTIONS**

### **COMPLETING CERTIFICATE OF EQUITY (SCHEDULE "A")**

You must complete the applicable Section "A" of this certificate and submit with the application to the lending institution at the time you apply for the loan.

Section "B" Part 1, and Part 2 will be completed by the lending institution.

If the funds are borrowed from friends, relatives or other non lending institutions you must include with the application the following documentation:

- 1) Copy of the loan agreement, indicating lender's name, address, telephone number, relationship, terms of repayment, collateral etc.
- 2) Copy of a sworn affidavit signed by the lender or representative, attesting that the loan will not be repaid before the Aboriginal Business Ventures Loan has been paid in full.

### **COMPLETING CERTIFICATE OF EXPENDITURES (SCHEDULE "B") AND SCHEDULE OF EXPENDITURES (SCHEDULE "C")**

Within six weeks of obtaining the loan, you must complete and submit the Certificate of Expenditures (Schedule "B") and Schedule of Expenditures (Schedule "C") with original invoices supporting your start-up costs to the Program office. The original invoices will be returned to you after they have been audited and a physical inspection of the expenditures has been undertaken at your place of business.

# ABORIGINAL BUSINESS VENTURES

## CERTIFICATE OF EQUITY SCHEDULE "A"

### SECTION A (To be completed by applicant)

I/We \_\_\_\_\_ certify that the cash equity deposited into my business account in the amount of:

- \$ \_\_\_\_\_ is from my personal savings on deposit at this institution.
- \$ \_\_\_\_\_ has been transferred from my personal savings on deposit with \_\_\_\_\_, and I/We have attached the necessary documentation as proof that the funds have been on deposit with that lending institution for not less than three months.
- \$ \_\_\_\_\_ is from proceeds of a loan, and I/we have attached a copy of the loan agreement indicating lender's name, address, telephone number, terms of repayments, collateral, etc.

(If the funds are borrowed from friends, relatives or other non lending institutions, you must include a loan agreement by the lender or representative that the loan will not be repaid before the Aboriginal Business Ventures loan is paid in full).

The cash deposited is my equity requirement to apply under the Aboriginal Business Ventures Program and to obtain a loan for the purpose of starting a new business. I/We agree these funds will be applied according to the project specified in the application.

\_\_\_\_\_  
Applicant

Date \_\_\_\_\_

\_\_\_\_\_  
Co-Applicant

### SECTION B (To be completed by the Lender)

#### Part I

We are satisfied that \_\_\_\_\_, has/have been banking with this institution for more than six months and that a transfer of funds in the amount of \_\_\_\_\_ has been made from their personal account to be deposited as cash equity towards an Aboriginal Business Ventures Loan. We also confirm that the amount in question has been in the individual's personal account for at least three months.

\_\_\_\_\_  
Lender

Date \_\_\_\_\_

\_\_\_\_\_  
Address

#### Part II

We confirm that \_\_\_\_\_ is not a customer of this bank. A transfer of funds in the amount of \$ \_\_\_\_\_ has been received from \_\_\_\_\_ (name of lending institution if applicable) and has been deposited as cash equity requirement towards the Aboriginal Business Ventures Loan.

\_\_\_\_\_  
Lender

Date \_\_\_\_\_

\_\_\_\_\_  
Address

# ABORIGINAL BUSINESS VENTURES

## CERTIFICATE OF EXPENDITURES SCHEDULE "B"

**LOAN NUMBER:** \_\_\_\_\_

**NAME OF BORROWER:** \_\_\_\_\_

**ADDRESS OF BORROWER:** \_\_\_\_\_  
\_\_\_\_\_

**TELEPHONE NUMBER:** \_\_\_\_\_

**NAME OF BUSINESS:** \_\_\_\_\_

**ADDRESS OF BUSINESS:** \_\_\_\_\_  
\_\_\_\_\_

**TELEPHONE NUMBER:** \_\_\_\_\_

I/We certify that the supporting invoices listed in the Schedule of Expenditure (Reverse side of this form) have been paid to the supplier and relate to financing this project as per page 15 of the application. All the capital expenditures are in my possession and ready for operation.

I/We certify that the information provided is accurate and understand that it is being relied upon by the Aboriginal Business Ventures Program to validate that the funds have been applied towards the business start-up.

\_\_\_\_\_  
**Applicant**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Co-Applicant**

# ABORIGINAL BUSINESS VENTURES

# **SCHEDULE OF EXPENDITURES**

## **SCHEDULE "C"**

**NOTE:** Submit this Form with supporting original invoices within six weeks of the approval and disbursement of the loan.

**NEW VENTURES OFFICE**  
**ONTARIO DEVELOPMENT CORPORATION**  
4 Robert Speck Parkway  
Suite 1160  
Mississauga, Ontario  
L4Z 1S1

## Attention: Manager

**For Office Use Only**

**INSPECTION CONFIRMED:** \_\_\_\_\_  
**(Date)**

## **Inspector**

COMMENTS: \_\_\_\_\_

# ABORIGINAL BUSINESS VENTURES

## **7. FINANCIAL**

Itemize major expenditures to show total start-up costs including funds required for day-to-day operation (working capital).

**Total Start-up Cost \$** \_\_\_\_\_

What is the source of your contribution?

Personal Cash

(Refer to and complete Certificate of Equity Schedule "A").

Borrowed

Amount \$ \_\_\_\_\_

What is the amount of the Aboriginal Business Ventures loan you are applying for? **Amount \$** \_\_\_\_\_

Other sources of funding. \_\_\_\_\_ Amount \$ \_\_\_\_\_

**Total Funds \$** \_\_\_\_\_

If you paid to have this application prepared, state the name of the company or individual(s)

Fee Paid: \_\_\_\_\_

Complete the attached projected cash flow and income statement.

An explanation is provided for the terms used on the statements.

## EXPLANATION OF TERMS

### 1. CASH FLOW FORECAST

#### **Estimated Sales**

The product/service you expect to sell in dollar amount.

#### **Cash Receipts**

Money you get from various sources.

#### **Cash from Sales**

Money received from selling your product/service. If you provide credit, then money to be collected depends on collection policy.

#### **Other (specify)**

Money from sources not specifically identified on the cash flow forecast e.g. interest received from cash in bank account.

#### **Cash Equity Contribution**

Money owner invests in business.

#### **Aboriginal Business Ventures Loan**

Money provided by participating financial institution, guaranteed by the Government of Ontario.

#### **Cash Disbursements**

Money you pay out.

#### **Purchase of Equipment**

Money you spend for equipment purchase.

#### **Rental Expenses**

Money you pay for equipment/premises rental.

#### **Labour Expenses**

Money you pay your employees in form of wages and benefits.

#### **Personal Drawings**

Money you pay yourself to cover personal expenses.

#### **Materials**

Money you pay for items to be used in the making of your product/service.

#### **Licences and Insurance**

Money you pay for required licences and insurance premiums.

#### **Advertising**

Money you pay for advertising your product/service.

#### **Selling Expenses**

Money you pay for the selling of your product/service.

#### **Office Expenses**

Money you pay for office help.

#### **Other (specify)**

Money you pay for expenses not specifically identified, i.e. charitable donations.

#### **Loan Repayment**

Money you repay the financial institution for its loan.

#### **Monthly Surplus**

The monthly cash receipts are greater than the month's cash disbursements.

#### **Monthly Deficit**

The month's cash receipts are less than the month's cash disbursements.

#### **Cumulative (to date)**

Total of each and every month's surplus and/or deficit.

### 2. PROJECTED INCOME STATEMENT

#### **Cost of Goods/Services Sold**

Direct costs incurred in the making of your product/service.

#### **Gross Profit**

Difference between sales in dollars and cost of goods/services sold.

#### **General Expenses**

Common expenses of doing business such as rent, hydro, advertising, insurance, etc.

#### **Interest Expense**

Amount to be paid for use of borrowed money (loan).

#### **Operating Profit**

Profit figure before provision for owner's drawings and taxes.

#### **Taxes Payable**

Identifying tax owing to reach net income figure.

#### **Net Income**

True profit from sales after making provision for all expenses.

**CASH FLOW FORECAST****CASH FLOW FORECAST FOR FIRST 12 MONTHS OF OPERATION**

	1	2	3	4	5	6	7	8	9	10	11	12	TOTAL
<b>Estimated Sales (monthly)</b>													
<b>Cash Receipts</b>													
Cash from Sales*													
Other (specify)													
Cash Equity Contribution													
Aboriginal Business Ventures Loan													
<b>Total</b>													
<b>Cash Disbursements</b>													
Purchase of Equipment													
Rental Expenses													
Labour Expenses													
Personal Drawings													
Materials													
Licences and Insurance													
Advertising													
Selling Expenses													
Office Expenses													
Other (specify)													
Loan Repayment													
<b>Total</b>													
<b>NET CASH: Total Cash Receipts minus Total Cash Disbursements = \$</b>													
Monthly Net Cash Surplus													
Monthly Net Cash Deficit													
Cumulative (to date)													

\* If your business grants credit, only include cash that will actually be collected.

# ABORIGINAL BUSINESS VENTURES

## PROJECTED INCOME STATEMENT

	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total Year 1	Total Year 2
<b>Sales</b>	\$	\$	\$	\$	\$	\$
Less: Cost of goods/services sold						
<b>Gross Profit</b>						
Less: Selling expenses						
Office expenses						
General expenses						
Interest expenses						
<b>Operating Profit</b>						
Less: Taxes Payable (Corporation) or Owner(s)' drawings (proprietorship or partnership)						
<b>Net Income</b>						



THIS IS YOUR FINAL APPLICATION FORM • PLEASE DETACH AT PERFORATION







# ABORIGINAL BUSINESS VENTURES

## ABORIGINAL BUSINESS VENTURES

YOUR  
APPLICATION

### PERSONAL INFORMATION

PLEASE PRINT

Last name, First name, Middle initial	Date of Birth	Social Insurance Number
Home address	<input type="checkbox"/> Own <input type="checkbox"/> Rent	Sex (M/F)
City	Postal Code	Home Telephone Number ( )
Previous address if moved within 3 years		Business Telephone Number ( )
Are you an Ontario Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No		How long have you lived at this address
State First Nation Group <input type="checkbox"/>		How long did you live at previous address

What will your role be in the business and how has your education and business experience prepared you for this role?

Role: \_\_\_\_\_

Education: \_\_\_\_\_

Business Experience: \_\_\_\_\_

Please provide information of your most recent employment:

Company Name: \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Gross Annual Income: \_\_\_\_\_

Title: \_\_\_\_\_ Date Employed From: \_\_\_\_\_ To: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Previous employer: \_\_\_\_\_ Date Employed From: \_\_\_\_\_ To: \_\_\_\_\_

Have you ever been self employed?  Yes  No

(If yes please give details) \_\_\_\_\_

If the new business fails how would you repay the Aboriginal Business Ventures loan?

Do you or any members of your family own an interest in a similar business or a business of which the new venture might be considered to be a natural extension?

Yes  No

(If yes, please explain) \_\_\_\_\_

Does your spouse or any other family member presently have or has ever had a New Venture loan or an Aboriginal Business Ventures loan?

Yes  No

(If yes, give details) \_\_\_\_\_

#### REFERENCES

Name of your Bank(s)/Location(s) \_\_\_\_\_

Landlord/Mortgage Holder \_\_\_\_\_

# ABORIGINAL BUSINESS VENTURES

## Real Estate Owned

Location	Registered Owner	Year Purchased	Purchase Price	Current Value
			\$	\$
Total Current Value				\$

## Details of Liabilities

Individual/Institution Holding Debt	Amount of Original Loan	Current Loan Outstanding	Monthly Payments	Loan Due Date	Purpose of Loan
	\$	\$	\$		
Total Outstanding		\$			

## Personal Financial Statement as at (Date) \_\_\_\_\_

### ASSETS

Cash	\$ _____	Mortgage(s) owing	\$ _____
Liquid Assets (stocks, bonds etc. please itemize)	_____	Credit Card(s) owing	\$ _____
	\$ _____		
Automobile (current value)	\$ _____	Loans (total outstanding)	\$ _____
Real Estate (total present value)	\$ _____		
<b>TOTAL ASSETS</b>	<b>\$ _____</b>	<b>TOTAL LIABILITIES</b>	<b>\$ _____</b>

**Net Worth (total assets minus total liabilities) \$ \_\_\_\_\_**

Do you have any guarantees or other liabilities outstanding?

Yes  No

Details, including amounts: \_\_\_\_\_

Are there any judgments or legal proceedings against you?

Yes  No

Details, including amounts: \_\_\_\_\_

Please list all sources and amounts of monthly income. \_\_\_\_\_

### CERTIFICATE

I certify that all of the information given by me in this application is true and complete.

I authorize the officers of this financial institution or the Ministry of Economic Development and Trade or their agents to make all necessary credit investigations or credit reporting and provide the Ontario Development Corporation with all relevant information. I approve the disclosure of any information concerning the undersigned to any credit requesting agency.

I agree that the Ontario Development Corporation may make a public announcement relating to this Aboriginal Business Ventures loan, if approved, and also has the right to audit the records of my business during the guarantee period.

I understand that any false information given in this application and any accompanying materials may result in rejection of this application or immediate demand for repayment of the loan in full together with any interest accrued thereon.

I authorize the Ministry of Economic Development and Trade and the Ontario Development Corporation to provide the lender with all relevant information.

### NOTICE

Any personal information contained in this, or any subsequent forms attached or forwarded at a later date, is received under the authority of Section 12 of the Development Corporations Act, R.S.O. 1980, C.117 as amended and Sections 3, 6 & 11 of the Ministry of Industry and Trade Act, S.O. 1982, C.31 and will be used to provide a data base of borrowers registered in the Aboriginal Business Ventures loan program, to ensure that borrowers receive only one loan and that statistical information on the program is recorded.

**It is an offence to obtain or to assist another to obtain the Aboriginal Business Ventures Program loan by fraud or false pretence.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**NOTE:** Complete a Personal Information Form for each Applicant, Co-Applicant and Shareholder who is a signing officer. If more forms are required, please make photocopies.

# ABORIGINAL BUSINESS VENTURES

## **CO-APPLICANT PERSONAL INFORMATION**

**PLEASE PRINT**

Last name, First name, Middle initial	Date of Birth		Social Insurance Number	
Home address	Own	Rent	Sex (M/F)	
City	Postal Code	Home Telephone Number (      )		Business Telephone Number (      )
Previous address if moved within 3 years			How long did you live at previous address	

Are you an Ontario Resident?  Yes  No State First Nation Group

What will your role be in the business and how has your education and business experience prepared you for this role?

Role: \_\_\_\_\_

Education: \_\_\_\_\_

Business Experience: \_\_\_\_\_

Please provide information of your most recent employment:

Company Name: \_\_\_\_\_ Telephone: (      )

Address: \_\_\_\_\_ Gross Annual Income: \_\_\_\_\_

Title: \_\_\_\_\_ Date Employed From: \_\_\_\_\_ To: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Previous employer: \_\_\_\_\_ Date Employed From: \_\_\_\_\_ To: \_\_\_\_\_

Have you ever been self employed?  Yes  No

(If yes please give details) \_\_\_\_\_

If the new business fails how would you repay the Aboriginal Business Ventures loan?

Do you or any members of your family own an interest in a similar business or a business of which the new venture might be considered to be a natural extension?

Yes  No

(If yes, please explain) \_\_\_\_\_

Does your spouse or any other family member presently have or has ever had a New Venture loan or an Aboriginal Business Ventures loan?

Yes  No

(If yes, give details) \_\_\_\_\_

### REFERENCES

Name of your Bank(s)/Location(s) \_\_\_\_\_

Landlord/Mortgage Holder \_\_\_\_\_

C

**Complete and Submit to Lender**



# ABORIGINAL BUSINESS VENTURES

## BUSINESS PLAN

As part of your Aboriginal Business Ventures Program application you are required to submit a business plan. Remember, a well prepared business plan is absolutely necessary because it serves to justify the business proposal, as well as to convince the lending officer that you have thoroughly researched and planned for your new business. It will also improve your chance for success.

### 1. BUSINESS PROFILE

Company Name	Company Telephone Number (        )
Company Address	
City	Postal Code

Date Business Registered/Incorporated Day      Month      Year

#### Form of Business Ownership

- Sole Proprietorship: Name \_\_\_\_\_
- Partnership: Names of Partners \_\_\_\_\_
- Corporation: Names of Signing Officers who are Shareholders \_\_\_\_\_

#### Classification of Business:

- Retail       Food       Farming       Tourism       Manufacturing       Service  
 Construction       Wholesale/Distribution       Professional       Other (specify) \_\_\_\_\_

Will your involvement in this business be       Full-time      or       Part-time

If part-time, please explain how your business will be able to operate full-time.  
\_\_\_\_\_  
\_\_\_\_\_

### 2. OBJECTIVES

Describe in detail what your business will do, what product or service will be provided?  
\_\_\_\_\_  
\_\_\_\_\_

### 3. COMPETITION AND SUPPLIERS

Who are your competitors, what are their locations, and how long have they been in business?  
\_\_\_\_\_  
\_\_\_\_\_

Explain why your customers will prefer your product or service over your competitors.  
\_\_\_\_\_  
\_\_\_\_\_

# ABORIGINAL BUSINESS VENTURES

## BUSINESS PLAN

Who are your major suppliers (if applicable), where are they located and what are their credit terms? Can you change your suppliers easily if required?

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### 4. CUSTOMERS

What market research have you conducted to determine how many potential customers are in the areas you plan to operate? The research may include door-to-door, telephone or mail surveys, discussions with suppliers or competitors, and statistical data. Please provide both the details of the research (eg. copy of questionnaire or survey, or how many you have called) and the results.

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What are the characteristics of your typical customers (ie. age, location, education, etc.)?

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How will you inform customers about your service or product?

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What form of advertising would be most effective for your business (business cards, radio, newspaper, pamphlets, etc.)?

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How much do you intend to spend on advertising and have you budgeted for this expense?

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### 5. PRICE AND COSTS

What does it cost you to offer your product(s) or service(s) to your customers? Cost may be expressed per unit, hour or job. Provide a breakdown of how you determined your cost including materials, labour, inventory and overhead costs.

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What price will you charge customers for your product(s) or service(s)? State prices in terms of quantity or fee per hour. If prices vary, give an example. Provide a breakdown of how you arrived at your prices. (Include your costs and markup or profit margins.)

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# ABORIGINAL BUSINESS VENTURES

What level of sales would you have to reach to just cover your costs (break-even point)?

Have you made provisions for contingency costs, such as warranty/servicing, insurance and start-up, in your pricing?

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## 6. OPERATING REQUIREMENTS

What government regulations, licences, permits and insurance pertain to your business and have they been obtained?

---

---

---

Identify your business requirements such as size and type of premises, equipment, furniture and fixtures. Will they be leased or purchased and will deposits be required?

---

---

---

---

What skills are required to operate your business and who will provide them?

Skills needed.

---

---

---

How many employees will you have to hire?

Number of Employees	At Start-up	Part-time	Full-time	By Year 3	Part-time	Full-time
	_____	_____	_____	_____	_____	_____

Will franchises, patents, trademarks and licensing agreements be important factors in your business? If yes, please provide a copy of the agreement with the franchisor, licensor and proof of approved patent or trademark.

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# ABORIGINAL BUSINESS VENTURES

# **BUSINESS PLAN**

## **7. FINANCIAL**

Itemize major expenditures to show total start-up costs including funds required for day-to-day operation (working capital).

**Total Start-up Cost \$** \_\_\_\_\_

What is the source of your contribution?      Personal Cash       Borrowed   
(Refer to and complete Certificate of Equity Schedule "A").

---

Amount \$ \_\_\_\_\_

What is the amount of the Aboriginal Business Ventures loan you are applying for? **Amount \$** \_\_\_\_\_

Other sources of funding. \_\_\_\_\_ Amount \$ \_\_\_\_\_

**Total Funds \$** \_\_\_\_\_

If you paid to have this application prepared, state the name of the company or individual(s)

**Fee Paid:** \_\_\_\_\_

Complete the attached projected cash flow and income statement.  
An explanation is provided for the terms used on the statements.

**CASH FLOW FORECAST****CASH FLOW FORECAST FOR FIRST 12 MONTHS OF OPERATION**

	1	2	3	4	5	6	7	8	9	10	11	12	TOTAL
<b>Estimated Sales (monthly)</b>													
<b>Cash Receipts</b>													
Cash from Sales*													
Other (specify)													
Cash Equity Contribution													
Aboriginal Business Ventures Loan													
<b>Total</b>													
<b>Cash Disbursements</b>													
Purchase of Equipment													
Rental Expenses													
Labour Expenses													
Personal Drawings													
Materials													
Licences and Insurance													
Advertising													
Selling Expenses													
Office Expenses													
Other (specify)													
Loan Repayment													
<b>Total</b>													
<b>NET CASH: Total Cash Receipts minus Total Cash Disbursements = \$</b>													
Monthly Net Cash Surplus													
Monthly Net Cash Deficit													
Cumulative (to date)													

\* If your business grants credit, only include cash that will actually be collected.

**PROJECTED INCOME STATEMENT**

	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total Year 1	Total Year 2
	\$	\$	\$	\$	\$	\$
<b>Sales</b>						
Less: Cost of goods/services sold						
<b>Gross Profit</b>						
Less: Selling expenses						
Office expenses						
General expenses						
Interest expenses						
<b>Operating Profit</b>						
Less: Taxes Payable (Corporation) or Owner(s)' drawings (proprietorship or partnership)						
<b>Net Income</b>						

# ABORIGINAL BUSINESS VENTURES

## **SUMMARY FORM** (To be completed by Applicant)

The information below can be obtained from the shaded areas of your application.

### **PERSONAL INFORMATION** (of applicant)

Complete for each applicant, for all partners in a partnership and for all signing officers who are shareholders of a corporation.

Name		Sex (M/F)	
Home Address		Home Telephone Number (        )	
		Postal Code	Date of Birth
Education		Social Insurance Number	
Resident of Ontario <input type="checkbox"/> Yes <input type="checkbox"/> No		Other (Please specify) <input type="checkbox"/> _____	
		First Nations Community (Please specify) <input type="checkbox"/> _____	
Your Annual Gross Income (from last or present employer)		Your Net Worth	Business Involvement <input type="checkbox"/> Full-time or <input type="checkbox"/> Part-time

### **PERSONAL INFORMATION** (of co-applicant)

Complete for each applicant, for all partners in a partnership and for all signing officers who are shareholders of a corporation.

Name		Sex (M/F)	
Home Address		Home Telephone Number (        )	
		Postal Code	Date of Birth
Education		Social Insurance Number	
Resident of Ontario <input type="checkbox"/> Yes <input type="checkbox"/> No		Canadian Citizen <input type="checkbox"/> Landed Immigrant <input type="checkbox"/> Other (Please specify) <input type="checkbox"/> _____	
Your Annual Gross Income (from last or present employer)		Your Net Worth	Business Involvement <input type="checkbox"/> Full-time or <input type="checkbox"/> Part-time

### **COMPANY INFORMATION**

Company Name			Date of Application Day    Month    Year
Address			Registration Date of Business Day    Month    Year
			Telephone Number (        )
Postal Code			Ownership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation
Classification <input type="checkbox"/> Retail <input type="checkbox"/> Food <input type="checkbox"/> Tourism <input type="checkbox"/> Manufacturing <input type="checkbox"/> Service <input type="checkbox"/> Construction <input type="checkbox"/> Wholesale Distribution <input type="checkbox"/> Farming <input type="checkbox"/> Professional			Other (Please specify) <input type="checkbox"/> _____
No. of Employees	Start-Up	By Year 3	Amount of Equity Contribution (must be in cash only)
Full-time			Total Start-up Cost
Part-time			Labour Expenses
			Estimated Sales, First Year of Operation
			Operating Profit

I (we) confirm that the above application is true and correct.

Signature of Applicant	Signature of Co-applicant	Date
------------------------	---------------------------	------

Personal information contained on this form is collected under the authority of the Development Corporations Act S.O.R. 1980, c. 117, s. 11 and s. 12 and will be used in the administration of the Aboriginal Business Ventures Program. Questions about this collection should be directed to: Manager, New Ventures Program, 4 Robert Speck Parkway, Suite 1160, Mississauga, Ontario L4Z 1S1.

# ABORIGINAL BUSINESS VENTURES

## BUSINESS EVALUATION FORM

(To be completed by Lending Institution)

### INSTRUCTIONS FOR LENDING INSTITUTION

- 1 After your interview with the applicant please complete this Business Evaluation Form. To obtain an Aboriginal Business Ventures Authorization number, call:

Metro Toronto Area 279-1142  
Outside of Metro Toronto 1-800-387-5616.

- 2 If the loan has been approved, tear along the perforated lines to remove this Business Evaluation Form and forward to New Ventures Office within 15 days of loan disbursement. Please ensure that the Summary Form on the back of this Business Evaluation Form has been completed by the applicant. Retain the application for your records and only submit it if you are making a claim on a defaulted loan.

- 3 If the applicant's loan is not approved please submit the application with the Business Evaluation Form for reimbursement of your processing costs.

Please address all correspondence to:

New Ventures Office  
The Ontario Development Corporation  
4 Robert Speck Parkway  
Suite 1160  
Mississauga, Ontario  
L4Z 1S1

Applicant(s) \_\_\_\_\_ Date Business Commences \_\_\_\_\_

Business Name \_\_\_\_\_ Interviewer \_\_\_\_\_

### LENDER'S INFORMATION

Lender \_\_\_\_\_ Transit No. \_\_\_\_\_

Address \_\_\_\_\_ Loan Amount \_\_\_\_\_

Postal Code \_\_\_\_\_ Tel. No. ( ) \_\_\_\_\_ Date of Credit Bureau Report \_\_\_\_\_ Day Month Year

### ASSESSMENT OF APPLICANT(S)

- 1 Have you verified applicant(s)' age(s) and community residency?

Yes  No

Yes  No

- 2 Credit rating(s) checked and found satisfactory?

Yes  No

Yes  No

- 3 Are you satisfied that the applicant(s) have no other business or personal debt which could affect repayment of the loan?

Yes  No

Yes  No

- 4 Do you judge the applicant(s) to have the personal commitment, management and technical skills necessary to carry out the business?

Yes  No

- 5 Has the applicant completed the application and is recommended by the Aboriginal Development Corporation?

Yes  No

- 6 Are you satisfied that the equity injected is bona fide and the Certificate of Equity is completed.

Yes  No

### ASSESSMENT OF BUSINESS

- 1 Has the business been registered?

Yes  No

Yes  No

- 2 Does the proposal make economic sense?

Yes  No

Yes  No

- 3 Is the amount of the loan requested reasonable and justified based upon the business plan?

Yes  No

Yes  No

- 4 Are the estimated sales/revenues realistic given local market conditions?

Yes  No

Yes  No

Comment: \_\_\_\_\_

Is application approved  Yes  No

Loan approved in the amount of \$ \_\_\_\_\_

Date of Loan Agreement \_\_\_\_\_

Aboriginal Business Ventures Authorization Number \_\_\_\_\_

Signature of Interviewer \_\_\_\_\_

Date of Loan Disbursement \_\_\_\_\_

Date \_\_\_\_\_ Day Month Year

Cash Equity \$ \_\_\_\_\_ deposited to an account in the name of the new business \_\_\_\_\_

Date \_\_\_\_\_ Day Month Year





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